

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
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EFS ID: 12718
Application ID: 09682837
Title of Invention: Apparatus and Method for
Scanning Multiple Arrays of
Biological Probes
First Named Inventor: David Stern
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-10-23
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Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: 3371.1
Digital Certificate Holder: cn=Alan B. Sherr, ou=Registered Attorneys, ou=Patent and Trademark
Office, ou=Department of Commerce, o=U.S. Government, c=US
Certificate Message Digest: pZUlieITemN/5iGBL+c1Gw==
Total Fees Authorized: \$1302.0

Payment Category: DA - Deposit Account
Deposit Account Number: 10431
Deposit Account Name: Alan B. Sherr



TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number:

3371.1

Apparatus and Method for Scanning Multiple Arrays of Biological Probes

First Named Inventor: Mr. David Stern

SUBMITTED BY

Name:

Mr. Alan B. Sherr

Registration Number:

42,147

Electronic Signature Mark: /Alan B.
Sherr/

Date Signed: 20011023

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I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

bibd-transmittal	3771apds.xml
patent-assignment	3771asgn.xml
specification	3371.1_xml_spec.xml
declaration	decl - pg1.tif
declaration	decl - pg2.tif
fee-transmittal	3771fee.xml

Attached Image File(s):

decl - pg2.tif

1955-1956

Comments:

09682837 10201

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PTO/SB/01 (12-87)

Approved for use through 9/30/00, OMB 0551-0032
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	3371.1
	First Named Inventor	David Stern
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	10/23/2001
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Apparatus and Method for Scanning Multiple Arrays of Biological Probes

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/242,859	10/24/00	
60/242,975	10/24/00	
60/244,817	10/31/00	

[Page 1 of 2]

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365 of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith

☒ Customer Number 22888 → Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Wei Zhou	44,419	Phillip L. McGarrigle	31,395
		Alan B. Sherr	42,147

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 22888 OR ☒ Correspondence address below

Name	Affymetrix, Inc.				
Address	General IP Counsel - Legal Department				
Address	3380 Central Expressway				
City	Santa Clara	State	CA	ZIP	95051
Country	USA	Telephone	408/731-5000	Fax	408/731-5392

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
David		Stern			
Inventor's Signature	<u>David Stern</u>			Date	10/22/01
Residence: City	Mountain View	State	CA	Country	USA
Post Office Address	1912 Montecito Avenue, #1				
Post Office Address					
City	Mountain View	State	CA	ZIP	94043
				Country	USA

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 2 of 2]

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Large Entity

TOTAL FEES AUTHORIZED: \$ 1302

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number:

01-0431



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Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

SUBMITTED BY

Authorized Name:

Alan B. Sherr

Electronic Signature Mark:

/Alan B. Sherr/

Date Signed:

20011023

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	101	\$ 740

Subtotal For Basic Filing Fee: \$ 740

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 35	103	\$ 18	15	\$ 270
Independent Claims: 6	102	\$ 84	3	\$ 252

Subtotal For Extra Claims Fees: \$ 522

ADDITIONAL FEES

Fee Description	Fee Code	Fee Paid
Recording Each Patent Assignment Per Property Fee	581	\$ 40

Subtotal For Additional Fees: \$ 40

09682837-433330